

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL CAPTAIN HIGGINS FOR CONGRESS				
ADDRESS (number and street) P.O. BOX 61747				
CITY LAFAYETTE		STATE LA		ZIP CODE 70596
2. NAME OF CANDIDATE Higgins, Clay, , Captain,			3. OFFICE SOUGHT (State and District) House LA 03	
4. FEC IDENTIFICATION NUMBER C00617662				
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON ____ / ____ / ____				

A. FULL NAME Devall, David, , ,			Name of Employer 4D Investment Partners		Date (month, day, year) 11/02/2022		Amount 1000.00	
MAILING ADDRESS 1711 Carl Lyons Rd			Transaction ID : 656367762448A48AB					
CITY Sulphur	STATE LA	ZIP CODE 70665-8677	Occupation Owner					
B. FULL NAME Davison, James, , ,			Name of Employer Origin Bank		Date (month, day, year) 11/02/2022		Amount 1000.00	
MAILING ADDRESS PO Box 607			Transaction ID : 6EFCE25A6DC5F4C5					
CITY Ruston	STATE LA	ZIP CODE 71273-0607	Occupation Banker					
C. FULL NAME Conrad, Johnny, , ,			Name of Employer Retired		Date (month, day, year) 11/02/2022		Amount 1000.00	
MAILING ADDRESS 150 Fairview Dr			Transaction ID : 6BCCFAECDB63049F					
CITY Berwick	STATE LA	ZIP CODE 70342-2343	Occupation Retired					
D. FULL NAME Peter M. John & David M. John Partnership			Name of Employer		Date (month, day, year) 11/02/2022		Amount 2500.00	
MAILING ADDRESS PO Box 1566			Transaction ID : 6BA52D10D5BD7483					
CITY Crowley	STATE LA	ZIP CODE 70527-1566	Occupation					
E. FULL NAME REGIONS FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE			Name of Employer		Date (month, day, year) 11/02/2022		Amount 1000.00	
MAILING ADDRESS 1015 15TH STREET NW SUITE 920			Transaction ID : 67819960503124264F					
CITY WASHINGTON	STATE DC	ZIP CODE 20005	Occupation					
SIGNATURE (optional) Satterfield, David, , ,					DATE 11/04/2022		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	
[Electronically Filed]								

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Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

FEC FORM 6
(Revised 03/2016)

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ADDRESS (number and street) P.O. BOX 61747			
CITY, STATE, and ZIP CODE LAFAYETTE LA 70596			
2. NAME OF CANDIDATE Higgins, Clay, , Captain,		3. OFFICE SOUGHT (State and District) House LA 03	
		4. FEC IDENTIFICATION NUMBER C00617662	
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continuation page			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE HUCK PAC PO BOX 2008 LITTLE ROCK AR 72203			
Name of Employer		Date (month, day, year) 11/02/2022	Amount 5000.00
Transaction ID : 62FB6E81480C84652850			
Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE We The People Leadership PAC PO Box 752 Rifle CO 81650-0752			
Name of Employer		Date (month, day, year) 11/02/2022	Amount 2000.00
Transaction ID : 6F73E11D9EB1E4963A78			
Occupation			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE Deliver. Excel. Believe. PAC 2211 E Highland Ave Ste 210 Phoenix AZ 85016-4834			
Name of Employer		Date (month, day, year) 11/02/2022	Amount 1000.00
Transaction ID : 6847F35C107BE4251BED			
Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE Weber For Congress 1701 Bending Stream Dr Friendswood TX 77546-7894			
Name of Employer		Date (month, day, year) 11/02/2022	Amount 1000.00
Transaction ID : 64404915571DA458ABA0			
Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE Williams, Jason, , , 3816 Sassafras Way Lake Charles LA 70605			
Name of Employer Pat Williams Construction		Date (month, day, year) 11/02/2022	Amount 2500.00
Transaction ID : 6895CD5D91FE44953B3B			
Occupation General Contractor			

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(Revised 07/2011)

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4. FEC IDENTIFICATION NUMBER C00617662		<i>continuation page</i>	
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Transaction ID : 672A9B52D659F4366B39			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE Dunaway, Lige, , , 121 Representative Row Lafayette LA 70508-3833	Name of Employer Lige Dunaway DDS Occupation Dentist	Date (month, day, year) 11/03/2022	Amount 1000.00
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation	Date (month, day, year)	Amount